

MULTIPLE INDEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

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| SERIAL NO. | FILING DATE |
| APPLICANT(S) | |

CLAIMS

| AS FILED | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | |
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| TOTAL CLAIMS | 1 | 2 | 3 | 4 |

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| TOTAL IND. | | | | | |
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| TOTAL CLAIMS | 1 | 2 | 3 | 4 | 5 |